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To the Reader:

This booklet is intended to serve as a resource for infection control programs in long-term care facilities. It was designed in order to improve the consistency and quality of patient care and employee health programs. This document addresses basic infection control practices that can be used in both acute and residential long-term care settings.

Although this project has been sponsored by the Utah Department of Health, Bureau of Epidemiology, these recommendations represent the efforts of many infection control practitioners (ICPs) and public health professionals dedicated to infection control, epidemiology and the care of the elderly. The current board of the Rocky Mountain Infection Control Association has been particularly invaluable by providing numerous reviews and suggestions for revision.

This publication has been developed as part of the public health response to a needs assessment survey that went to all infection control practitioners (ICPs) in Utah's long-term care facilities. Results of the survey indicated that the application of surveillance and prevention methods varied greatly from facility to facility. While ICPs wanted to improve their infection control programs, they frequently lacked the essential training and basic resources necessary to do so. This is not surprising since the majority of guidelines available for infection control are dedicated to the hospital setting, which is quite different than an extended care facility. Long-term care facilities must not only provide good medical care but a place of residence and social activity. Furthermore, while most hospital ICPs focus strictly on infection control activities, ICPs working within the long-term care setting often have additional responsibilities which can take away from their epidemiological focus and the time spent within infection control.

The information contained within this booklet is designed to provide an introduction or a review of epidemiological techniques for infection control programs. It contains basic information on surveillance issues including data management, a review of barrier techniques, isolation policies, employee health concerns and other pertinent topics. A reference list has been included so that ICPs can expand their knowledge by reviewing the current medical literature. Additionally, practitioners can improve their knowledge of infection control by networking with others working in the field, attending conferences and workshops and reading periodicals, newsletters and journals.

Infection control is a challenging and dynamic field. While this resource is limited in its scope and information, it is our hope that it will be a useful starting point for ICPs to review and further develop their programs. We encourage each ICP to become familiar with the current standards and medical literature before revising facility policies and procedures and to share information freely with other ICPs in efforts to improve the quality of care provided to our elderly.

Utah Department of Health
Bureau of Epidemiology